## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09871149

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |                 |                            |                                |                  |       | SMALL ENTITY TYPE   |                        | OR      | OTHER THAN<br>OR SMALL ENTITY |                        |
|--|--|---|-----------------|----------------------------|--------------------------------|------------------|-------|---------------------|------------------------|---------|-------------------------------|------------------------|
| TOTAL CLAIMS   |  |   | 20              |                            |                                |                  |       | RATE                | FEE                    |         | RATE                          | FEE                    |
| FOR  |  |   | NUMBER FILED    |                            | NUMBER EXTRA                   |                  |       | BASIC FEE           | 355.00                 | OR      | BASIC FEE                     | 710.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | 32minus 20=     |                            | . 12                           |                  |       | X\$ 9=              | 108                    | OR      | X\$18=                        |                        |
| INDEPENDENT CLAIMS   |  |   | ( m             | inus 3 =                   | · 3                            |                  |       | X40=                | 920                    | OR      | X80=                          |                        |
| MU   | LTIPLE DEPEN                             | DENT CLAIM P                              | RESENT          |                            |                                |                  |       | +135=               | 135                    | OR      | +270=                         |                        |
| * If the difference in column 1 is less than zero, enter   |  |   |                 |                            | r "0" in d                     | column 2         | 1     | TOTAL               | 718                    | OR      | TOTAL                         |                        |
| CLAIMS AS AMENDED - PAR  |  |   |                 |                            |                                |                  |       |                     |                        |         | OTHER                         |                        |
| _  |  | (Column 1)<br>CLAIMS                      |                 | (Colu                      |                                | (Column 3)       |       | SMALL               |                        | OR      | SMALL                         |                        |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT           |                 | NUM<br>PREVI               | BER                            | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total                                    | *   | Minus           | **                         |                                | =                |       | X\$ 9=              |                        | OR      | X\$18=                        |                        |
|  | Independent                              | *   | Minus           | ***                        |                                | =                |       | X40=                |                        | OR      | X80=                          |                        |
| L  | FIRST PRESE                              | NTATION OF M                              | ULTIPLE DE      | PENDEN                     | CLAIM                          |                  |       | +135=               |                        | OR      | +270=                         |                        |
|  |  |   |                 |                            |                                |                  |       | TOTAL               |                        | OR      | TOTAL                         |                        |
|  |  |   | ADDIT. FEE      |                            |                                | ADDIT. FEE       |       |                     |                        |         |                               |                        |
| AMENDMENT B  |  | (Column 1) CLAIMS REMAINING               |                 | HIGH<br>NUM                | mn 2)<br>HEST<br>IBER<br>OUSLY | (Column 3)       |       | RATE                | ADDI-<br>TIONAL        |         | RATE                          | ADDI-<br>TIONAL        |
|  |  | AFTER<br>AMENDMENT                        |                 |                            | FOR                            | EXTRA            |       | 10012               | FEE                    |         | 10012                         | FEE                    |
|  | Total                                    | *   | Minus           | **                         |                                | =                |       | X\$ 9=              |                        | OR      | X\$18=                        |                        |
|  | Independent                              | *   | Minus           | Minus ***  LTIPLE DEPENDEN |                                | =                |       | X40=                |                        | OR      | X80=                          |                        |
| L  | FIRST PRESE                              | NTATION OF M                              | OLTIPLE DE      | PENDEN                     | CLAIN                          |                  | J     | +135=               |                        | OR      | +270=                         |                        |
|  |  |   |                 |                            |                                |                  |       | TOTAL<br>ADDIT. FEE | ·                      | OR      | TOTAL<br>ADDIT. FEE           |                        |
|  |  | (Column 1)                                |                 | (Colu                      | mn 2)                          | (Column 3)       |       |                     |                        |         |                               |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | NUN<br>PREV                | HEST<br>MBER<br>OUSLY<br>FOR   | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total                                    | *   | Minus           | **                         |                                | =                |       | X\$ 9=              |                        | OR      | X\$18=                        | 7                      |
|  | Independent                              | *   | Minus           | ***                        | <u>.</u>                       | =                |       | X40=                |                        |         | X80=                          |                        |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT |   |                 |                            |                                | 1 🗆              |       | 7,10-               |                        | OR      |                               |                        |
|  |  |   |                 |                            | - "O" *-                       | aluman O         |       | +135=               |                        | OR      | +270=                         |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |   |                 |                            |                                |                  |       |                     |                        |         |                               |                        |
|  | The "Highest Nu                          | mber Previously P                         | aid For" (Total | or Indepen                 | dent) is th                    | ne highest numbe | er fo | und in the ap       | propriate bo           | x in co | olumn 1.                      |                        |